PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

200206404-1

TOTAL CLAIMS FOR NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS Minus 20= * 4 INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) TOTAL OR OR * W86: ADDI- RATE FEE BASIC FEE 385.00 OR X\$18 X\$9= OR TOTAL OR OTH SMALL ENTITY OR SMALL ENTITY OR ADDI- FEE ADDI- FEE TOTAL ADDI- FEE OR * Y\$18 TOTAL OR X\$18 ADDI- FEE OR * Y\$18 TOTAL OR TOTAL OR TOTAL OR TOTAL OR TOTAL OR ADDI- FEE OR X\$18 TOTAL OR ADDI- FEE OR ADDI- FEE OR TOTAL OR TOTAL OR ADDI- FEE OR ADDI- FEE OR ADDI- TOTAL OR ADDI- FEE OR ADDI- TOTAL OR ADDI- FEE OR ADDI- TOTAL OR TOTAL OR ADDI- TOTAL OR TOTAL OR ADDI- TOTAL OR TO	FEE 770.00 162 172 1704 THAN ENTITY ADDITIONAL FEE
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TOTAL CHARGEABLE CLAIMS	162 172 1104 THAN ENTITY ADDI- TIONAL
INDEPENDENT CLAIMS minus 3 = * 2 MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR Total * Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (Column 2) (Column 3) * X43= OR X866 * TOTAL OR TOTAL OR TOTAL OR ADDITATIONAL FEE X\$ 9= OR X\$ 18 X\$ 9= OR X\$ 18 X\$ 9= OR X\$ 18 X\$ 18	177 I/OLA THAN ENTITY ADDI- TIONAL
MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * CLAIMS HIGHEST PRESENT PRESENT EXTRA AMENDMENT PREVIOUSLY PAID FOR Total * Minus *** = Independent * Minus *** = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (Column 1) (Column 2) (Column 3) * TOTAL OR TOTAL X\$ 9= OR X\$18 X43= OR +290 OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR OR ADDIT. FEE OR ADDIT. FEE OR OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR OR ADDIT. FEE OR ADDIT. FEE OR OR ADDIT.	THAN ENTITY ADDITIONAL
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Total * Minus ** = X\$ 9= OR X\$18	
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.	